Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

(Column 1) (Column 2)								SMALL ENTITY TYPE OR			OTHER THAN	
TOTAL CLAIMS			(Column	1/	Colui	1111 2)	1			OR 1	SMALL	
- (6)				-				RATE	FEE		RATE	FEE
FOR 29		NUMBER FILED		NUMBI	ER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			α 9 minus 20=		9			X\$ 9=		OR	X\$18=	162
INDEPENDENT CLAIMS			minus 3 =					X40≃		OR	X80=	
MU	LTIPLE DEPEN	DENT CLAIM PI	RESĚNT	SĚNT				+135=	. =	OR	´+270=	
* If	the difference	in column 1 is	less than ze	ess than zero, enter "0" in column 2				TOTAL		OR	TOTAL -	10.72
CLAIMS AS AMENDED - PART II							<u> </u>				OTHER	THAN
			(Column 2) (Column			SMALL ENTITY			OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total		Minus	**		=		X\$ 9=	,==	OR	_X\$18=	
	Independent	NTATION OF M	Minus	PENDEN	T CLAIM		- :	X40=		OR	X80=	
				\		<u>- </u>	1	+135=		OR	+270=	*-
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)											,	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	•	RATE	ADDI: TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	l l	X40=		OR	X80=:	<u> </u>
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								•	Un.	•	
REST AVAILABLE CODY								+135=		OR	+270=	
	BEST AVAILABLE COPY							TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
	•	(Column 1)			mn 2)	(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	•	Minus	***		=		X40=		OR	X80=	
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									Un		
	f the entry in eather	mn 4 in lass 45cc 4	na antaria sale		- "O" :!	ump 2		+135=		OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If th "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ****If th "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR	TOTAL ADDIT, FEE	
		mber Previously Panber Previously Pa							ropriate box			